KENTUCKY I	ECISI	ATIVE	ETHICS	COM	MISSIA
and region is the contract of		A		N. N. J. P. B. L.	TEELO COLECTI

STATEMENT OF FINANCIAL DISCLOSURE (KR\$ 6.787)

To be filed by: All members of the General Assembly, all candidates and nominees for election to the

General Assembly, and major management personnel in the legislative branch of state government.
☐ Check here and attach additional sheets if necessary Number of sheets attached.
Please Include The Following Information For The Preceding Calendar Year:
Name Kent Stevens
Rusiness address DA ROX 57 Toulors (1) le K. 40071
Business address Po Box 57 Taylors ville Ky 40071 Business telephone 502 477-0881
Home address 1062 Hazel Dr Lawrenceburg Ky 40342 Fitle of public position, or office sought Dustriet 55 House
Title of public position, or office sought <u>District 55 House</u>
Other occupations of filer Used Car Dealer
Other occupations of filer <u>Used Car Dealer</u> Occupations of spouse <u>Retired Teacher + Principal</u>
NOTE: The Following Sections Do Not Require Disclosure Of Specific Dollar Amounts.
Positions held by filer in any business, partnership, corporation for profit, or corporation
not for profit from which the filer receives compensation, and the name of the business,
partnership, or corporation Partner & General Mgr Lakefown Motocs Inc
Laketown Motors Inc
Positions held by filer's spouse in any business, partnership, corporation for profit, or
corporation not for profit from which the filer receives compensation, and the name of the
ousiness, partnership, or corporation
None
Names and addresses of all businesses, investments, or securities in which the filer, filer's
spouse, or filer's minor children had at any time during the reporting year an interest of
\$10,000 at fair market value, or 5% ownership interest or more
Laketown Motoks
Proneer Fund Investments
National Life
Nation Wide Inventments

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			filer's spouse (list sour	ces by name)
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The name of any legislat	ive agent wr	10 1S:			
1. A member of t					
2. A partner of th				the filer's in	nmediate family;
3. An officer or of4. An employer of			~ .	per of the file	er's immediate
family;	1 1110 11101 01	an ompio	joi oi a mom	or or the in	or o minioanato
5. A business ass filer's immedia		filer or a	business asso	ciate of a me	ember of the
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The names of any of the	filer's clients	s who are	legislative age	ents or emplo	oyers
	N	one .			
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If you have held a profes	sional licens	e during t	he filing perio	od, has a pro	perly licensed
partner of yours engaged prohibited from practicing					

If yes, list the names of the client partner made an appearance. The before a specific agency.	its represented and list the agencies before which the ne filer need not identify which client was represented
Clients	
State Agency	
	NOTICES
1. Upon receipt by the Commiss record available for copying.	sion, a statement of financial disclosure shall be a public
2. Any person who fails to file a a deficiency identified by the Corto exceed \$100 per day up to a m	statement of financial disclosure or who fails to remedy numission in a timely manner may be fined an amount not aximum total fine of \$1000.
3. Any person who files a statem false information, or to omit required misdemeanor.	ired information, shall be guilty of a class A
FEB/1/09 Date	Filer
Send completed statements to:	The Kentucky Legislative Ethics Commission 22 Mill Creek Park Frankfort, Kentucky 40601
If you have questions please call	us at (502) 573-2863.